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CORRENT CORREST OFFICER ADDRESS (FIGURE OF BIOCK 1 TO BITY CHARGE OF BROWNING				s) Transmittal. This	confibrate cannot be used f	or domestic mailings of the for any other accompanying ont or formal drawing, must	
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Michael T Sander King & Schickli Pl 247 North Broadw	LLc ay		I her State addr trans	Certi- reby certify that this ss Postal Service wit essed to the Mail 5 smitted to the USPTO	ficate of Mailing or Trans: Fec(s) Transmittal is being h sufficient postage for firs Stop ISSUE FEE address O (571) 273-2885, on the d	mission g deposited with the United st class mail in an envelope above, or being facsimile ate indicated below	
Lexington, KY 405	007					(Depositor's name)	
						(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	,	ATTORNEY DOCKET NO	CONFIRMATION NO	
09/943,786 08/31/2001			Michel Shane Simpson		1363-007 1045		
TITLE OF INVENTION: M						NATE NO.	
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI:	HEE TOTAL FEE(S) DUE		
nonprovisional	NO	\$1510	\$0	so	\$1510	04/21/2009	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
LY, ANH		2162	707-003000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  ☑ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single registered attorney or a	I up to 3 registered patent attorneys lematively.  a single firm (having as a member a cy or agent) and the names of up to int attorneys or agents. If no name is			
(A) NAME OF ASSIGN	an assignee is identi n 37 CFR 3.11. Comp EE		data will appear on the part a substitute for filing an (B) RESIDENCE: (CITY	atent. If an assigned assignment. and STATE OR CC		ocument has been filed for	
Novell, Inc.			·	Provo, Utah			
Please check the appropriate	e assignee category or	entegories (will not be pr	rinted on the patent) · 🖳	Individual 💹 Con	poration or other private gro	oup entity Government	
4a. The following fee(s) are submitted:    Issue Fee			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 1.0. 978 (enclose an extra copy of this form).				
5. Change in Entity Status  a. Applicant claims S			b. Applicant is no long	ger claiming SMALI	L ENTITY status. See 37 C	FR 1,27(g)(2).	
	ublication Fee (if requ	ired) will not be accepte	d from anyone other than t			ne assignee or other party in	
Authorized Signature Wellhur			A STATE OF THE STA	Date 2	- 2 <i>5-09</i> February 25		
Typed or printed name _	Michael T	. Sanderson	Reg. # 43,087	Registration No	February 25	, 2009	
michandra, y remna 223 (3)	1430.		on is required to obtain or r 1.14. This collection is est depending upon the indiv e Chief Information Office COMPLETED FORMS TO	etain a benefit by the imated to take 12 m idual case. Any con r, U.S. Patent and T ) THIS ADDRESS.	e public which is to file (and inutes to complete, including the interest of the amount of tir- rademark Office, U.S. Dept SEND TO: Commissioner splays a valid OMB control	d by the USPTO to process) ng gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450.	